RECEIVED 2012 AUG 13 AM 8: 08

C	om	ımi	ltee	Name	e:	
-	_	-				

Committee Name:	WIE CENTER
MASSACHUSETTS HORSE ASSOCIATION	:
If registered, FEC ID:	
Today's Date:	
08/08/2012	

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name: Caramante

12030873301

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2012 AUG 13 AM 8: 08

Office Use FOEC MAIL CENTER

NAME OF COMMITTEE (in full)		Check if name changed)	Example: If typing, type over the lines.	12FE4M5	02/11
MASSACHUSET	TS _, H	OŖȘĘ ĄŞ	SOCIATION		<u> </u>
ADDRESS (number and street)	ســـا				
(Check if address	لللا				
is changed)	ــــــا	1.1.1.1.1.		سا لسا	
		С	ΙΤΥ	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES		·			
(Check if address	ıman	orseassoc	ciation@gmail.c	οη, , , , , ,	
is changed)	Ш.				
COMMITTEE'S WEB PAGE ADD	•	•	shorseassociati	on.tumblr.co	om, , , , , , ,
(Check if address is changed)					
2. DATE	/ Y	Y (Y (Y			
3. FEC IDENTIFICATION NU	MBER	C			
4. IS THIS STATEMENT	NEW	(N) OR	AMENDED (A)		
I certify that I have examined thi	s Stateme	nt and to the best o	f my knowledge and belief it	is true, correct and co	mplete.
Type or Print Name of Treasurer	Juli	e Caramar	nte		
Signature of Treasurer	Jul	ie Cara	mante	Date 08 'C)8° ′ 20′12.
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.					
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	on FE	EC FORM 1 devised 02/2009)

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	F	FEC Fo	rm 1 (Revised 02/2009)	Page 2						
j.	TYPE	OF C	OMMITTEE	-						
	Can	didate	Committee:							
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)							
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate						
	Name		1							
	Cand	lidate		· · · · · · · · · · · · · · · · · · ·						
	Cand Party	lida t e Affiliati	Office Sought: House Senate President	State District						
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District						
	Name Cand									
	Part	ty Con	nmittee:	_						
	(d)			Democratic, Republican, etc.) Party.						
	Poli	Political Action Committee (PAC):								
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nected organization is a:						
			Corporation ·· Corporation w/o Capital Stock	Labor Organization						
			Membership Organization Trade Association	Cooperative						
			In addition, this committee is a Lobbyist/Registraot PAC.							
	(f)	\times	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party						
			In addition, this committee is a Lobbyist/Registrant PAC.							
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)							
	Join	t Fund	Iraising Representative:							
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a fadoral candidate.	o or more political						
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political						
		Com	mittees Participating in Joint Fundraiser							
		1.	FEC ID number	· · · · · · · · · · · · · · · · · · ·						
		2.	FEC ID number: C							
		3.		· · · · · · · · · · · · · · · · · · ·						
		4		<u>222</u>						
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	FEC FOIII I (Nevised	02/2009)	rage 3					
	Write or Type Committee Name							
V	MASSACHUSETTS ASSOCIATION							
6.	. Name or Any Corinected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor							
<u>L</u>	None		11111					
L								
	Mailing Address							
			J-L					
		CITY STATE ZIP	CODE					
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Leaders	hip PAC Sponsor					
' .	Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position of the person in possess	on of committee					
	Full Name Paula	Bacon						
	Mailing Address	1504 S. Houston Street						
		Kaufman TX 75142	J-[
	Title or Position	CITY STATE ZIP (CODE					
	Custodian of Rec	cords Telephone number 972 1 824	[1073					
3.	Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the name a assistant treasurer).	nd address of					
	Full Name of Treasurer	Caramante	لــــــــــــــــــــــــــــــــــــــ					
	Mailing Address	1504 S. Houston Street						
		Kaufman TX 75142 CITY STATE ZIP C	ODE					
	Title or Position Treasurer	Telephone number 281 _ 766	j- <u>[4040</u>					

-	FEC Form	2/2009)		Page 4		
	Full Name of Designated	_l Paula B	acon			
	Agent Mailing Address	<u> </u>	1504 S. Houston Street			
		L	 			
		L	(ацітар _{—————} сіту		STATE	[75142 -
	Title or Position Assistant T	reasurer _i		Telephone num	nber <mark>97</mark>	[2 - 824 - 1073
9.	Banks or Other safety deposit bo Name of Bank, [xes or maintai	List all banks or other depositories in ns funds.	n which the committe	ee deposits	funds, holds accounts, rents
		JPMorg	an Chase Bank			
	Mailing Address	Ľ	311 Preston Road			
		L				
		L	Dallas , , , , , , , , , , , , , , , , , , ,		ΤX	75525
			CITY		STATE	ZIP CODE
	Name of Bank, [Depository, etc.				
				1 1 1 1 1 1		
	Mailing Address	L			111	
		L				
		L		لسسسا		
			CITY		STATE	ZIP CODE

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): **DATE PREPARED**